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## \*BIBDATASHEET\*

CONFIRMATION NO. 5397

Bib Data Sheet

SERIAL NUMBER 10/787,138	FILING DATE 02/27/2004  RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 034536-1246
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 09/476,484 12/30/1999  
 which claims benefit of 60/114,465 12/30/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/14/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 16	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Allowance <input checked="" type="checkbox"/> Met after				
Verified and Acknowledged	Examiner's Signature	Initials		

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## TITLE

PYK2 and inflammation

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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